ATTORNEY GENERAL-S CEMETERY SURVEY FORM

Please identify any cemetery you are aware of and provide as much of the following information as possible. Please use a separate form for each cemetery. Return to Office of the Attorney General, Consumer Protection Division, 1024 Capital Center Drive, Frankfort, Kentucky 40601. Forms may also be downloaded from or completed online at www.kyattorneygeneral.com/cemetery. **Please submit all completed survey forms no later than August 15, 2001**.

1. Name of Cemetery:			
2. Location of Cemetery (address, county):			
3. Owner of the Cemetery:			
4. Contact person/phone number for the Co	emetery:		
5. Type of owner: Religious Group Non-Profit Organization Other	Privat Sole Proprietorship	e Family Burial Ground Corporate	
6. Total number of acres/graves:			
7. Total number of graves available/used:_			
8. Are spaces currently provided to the ger grave	neral public? If yes - current cha	rge for one grave space	for opening/closing
9. What arrangements have been made for of any documentation:			ws etc.? Please attach a copy
10. Is maintenance provided by community nonprofit organizations or ot			
11. Is the cemetery in need of additional m for providing necessary maintenance.		nent? If so please explain inclu	iding estimated annual cost
12. Is the cemetery abandoned, if so can yo	ou provide last known contact?		
13. Are you aware of any culturally or history	orically significant cemeteries in	need of preservation or mainte	enance?
Name/Address:		Phone	No
Contact:		Phone	No
Why is this cemetery significant?(add addit	ional pages if necessary):		